

OFFICE USE ONLY!

Test Date: _____ Large _____ Small _____ Field _____ RFD _____ VTM _____ LPG _____ Bulk _____

Retest Date: _____ Large _____ Small _____ Field _____ RFD _____ VTM _____ LPG _____ Bulk _____

KANSAS DEPARTMENT OF AGRICULTURE
DIVISION OF WEIGHTS & MEASURES
1320 RESEARCH PARK DRIVE
MANHATTAN, KS 66502
PH: 785-564-6681 FAX: 785-564-6779

TECHNICAL REPRESENTATIVE OR SERVICE TECHNICIAN APPLICATION:

Permits 1) removal of rejection tags placed on weighing and measuring devices by the State of Kansas Weights and Measures officials; 2) place in service repaired devices which have been previously rejected; 3) place in service newly installed devices; 4) perform annual testing of commercial devices as required by Kansas law.

Email Address _____ Date _____

Name _____ DOB _____

(Last) (First) (MI) Tech # _____

Home Address _____

City _____ State _____ Zip Code _____ Phone _____

Company _____ Office Phone _____

Company Address _____
(City) (State) (Zip)Applicant Desires to: ☐ Repair only ☐ Test only ☐ Repair and Test☐ Retail Computing Scales ☐ Small Scales ☐ Livestock Scales ☐ Hopper Scales☐ Vehicle Scales☐ Vehicle Tank Meters ☐ Retail Fuel Dispensers ☐ LP Meters☐ Mass Flow Meters ☐ Bulk MetersTest Equipment Available: ☐ Test kits ☐ 50 lb wts ☐ 1000 lb wts☐ 5 gal test measures ☐ Large volume provers ☐ Refined Fuel ☐ LP

Last Date Test Equipment Certified: _____, 20____

NIST Approved Lab: _____

Do you have available a current copy of the NIST Handbook 44? **2012** ☐ Yes ☐ No

NIST Handbook 44, Specifications, Tolerances and other Technical Requirements for Commercial Weighing and Measuring devices is available from the Superintendent of Documents, U.S. Government Printing Office. Washington, D.C., 20402; online at <http://ts.nist.gov/ts/htdocs/230/235/ownhome.htm>; <http://ts.nist.gov/ts/htdocs/230/235/ownhome.htm>, or by joining the National Conference on Weights and Measures.

I hereby agree that if this application is approved and the Registration and Permit granted, I will not remove Rejection Tags from a device nor issue a Device Installation Report (DI-701) unless I find, as a result of inspection and test, that the device meets all of the requirements of the laws, specifications, tolerances, rules and regulations applicable to same. I further agree that the State Department of Agriculture may cancel my Registration and revoke my permit for good cause, after a hearing thereon. Should my Registration be cancelled and my Permit revoked, I will surrender my Registration Certificate to the Department immediately.

Printed Name _____

Signature _____
Must Be Legible

Note: For additional remarks or information, attach extra sheet(s). Detailed information of qualifications and equipment possessed is especially important.